

STATE OF MINNESOTA

DISTRICT COURT

COUNTY OF HENNEPIN

FOURTH JUDICIAL DISTRICT

State of Minnesota,

**DECLARATION OF SARAH  
YVONNE VINSON**

Plaintiff,

v.

Derek Michael Chauvin,

Court File No.: 27-CR-20-12646

Defendant.

TO: The Honorable Peter Cahill, Judge of District Court, and counsel for Defendants; Eric J. Nelson, Halberg Criminal Defense, 7900 Xerxes Avenue South, Suite 1700, Bloomington, MN 55431.

SARAH YVONNE VINSON, being duly sworn deposes and states:

**Background and Qualifications**

1. My name is Sarah Yvonne Vinson, and I am a Triple Board-Certified Child & Adolescent, Adult and Forensic Psychiatrist. My CV is attached.
2. I graduated with Research Honors from the University of Florida College of Medicine where I was elected by my peers to the Chapman Humanism Honor Society.
3. I completed my Adult/General Psychiatry training at Harvard Medical School/Cambridge Health Alliance. While there, I received specialized training in Trauma through the Victims of Violence Program. I then completed two psychiatric subspecialty training programs (or fellowships) in Child & Adolescent Psychiatry and Forensic Psychiatry at Emory School of Medicine.

4. Since 2013, I have been triple board certified in adolescent, adult, and forensic psychiatry, and have been continuously in clinical practice, independently evaluating, diagnosing, and treating children, adolescents, and adults in both private and public treatment settings.
5. I hold academic appointments at two medical schools and in three academic departments (two psychiatry and one pediatrics). I serve as the Medical Advisor for the United States' first and only Substance Abuse and Mental Health Services Administration (SAMHSA) Center of Excellence for African-American Mental Health, and as the Program Director for the first and only Child and Adolescent Psychiatry Training Program at a Historically Black College and University (HBCU) Medical School.
6. I am the co-editor of the text Social (In)Justice and Mental Health, which was published by American Psychiatric Association Publishing, the entity that also publishes the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-V).
7. As medical school faculty with appointments in three different academic departments, a thought leader within my field, and a practicing clinician, I have expertise in child trauma and structural violence.
8. I have been a Grand Rounds speaker at multiple academic institutions and a speaker and discussant at multiple national psychiatric meetings on the topics of Structural Trauma and Black Mental Health and Social Injustice.
9. I am one of two Psychiatric Advisors for the Judges Psychiatry Leadership Initiative, a collaboration between the Council for State Governments and the American Psychiatric Association Foundation.
10. Over my career as a treating psychiatrist, I have diagnosed and treated numerous individual patients suffering from various emotional and behavior disorders, including but not limited

to trauma and stressor related disorders, depressive disorders, anxiety disorders, substance use disorders, psychoses, developmental disabilities, and personality disorders.

11. My clinical work has consistently included treatment settings where I serve patients and families from communities that have been disproportionately impacted by racism, police violence, and structural trauma.
12. In addition to my clinical practice, I have served as a forensic psychiatrist in both the civil and criminal justice systems. In the course of this work, I have been recognized in state, federal, criminal, and family courts as an expert in the field of psychiatry.
13. In the criminal context, I have served in numerous capacities, including as a trauma expert. When I evaluate cases as a forensic psychiatrist, I do not enter into a treatment relationship of any kind with clients or collateral informants. However, there is overlap in the skills, knowledge, and methodology used for psychiatric assessment, diagnosis, and treatment in clinical care and those used in forensic psychiatric consultations. In both roles, evaluation may include, but is not limited to, consideration of cultural factors, and social and structural determinants of health, and development.
14. My clinical and academic training, professional psychiatric experience, expertise in mental health, scholarly pursuits, and familiarity with pertinent literature have informed the opinions contained herein.
15. For my time spent as a forensic psychiatric consultant in this case, I am reimbursed at a rate of \$300.00 per hour.

### **Summary**

16. In the above-referenced case, the presence of minors at the time of Derek Chauvin's murder of George Floyd has been discussed as a potential aggravating factor. The State asked me

to opine on psychological considerations raised by this discussion, including structural, developmental, and cultural components.

17. During the trial, four female witnesses who were minors at the time of Mr. Floyd's murder by Defendant Chauvin testified. I viewed the testimony of the four minor witnesses in this case in their entirety. The psychological, cultural, and structural considerations that are foundational for the opinions set forth herein are neither novel nor unusual for experts in the psychiatric field and in cultural psychiatry to address.
18. As elaborated below, I have reached the following conclusions to a reasonable degree of medical certainty:
19. Understanding the potential psychological harm to minors as a result of exposure to a violent crime requires a multi-faceted approach, particularly in a situation such as this one.
20. As an adult, Derek Chauvin had an inherent degree of authority over the minor witnesses. In addition, all minor witnesses identified Defendant Chauvin as a police officer, which is notable because of the state-sanctioned authority conveyed by that title.
21. Two of the minors are Black, the same race as the victim, which is notable because this shared characteristic may engender identification with the victim.<sup>1</sup>
22. Given the nature of the underlying crime in this case, a murder by an authority figure, it would be expected and should be presumed that the children who bore witness to this experienced trauma. Although there was no specific inquiry into the psychological impact these children experienced, the limited information we have—primarily the trial testimony of the children about their thoughts and feelings—indicates that the witnesses experienced trauma.

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<sup>1</sup> I am not aware of evidence regarding the race of two of the four minor witnesses.

23. One also cannot draw any inference about the trauma the minor witnesses experienced from the fact that they may have briefly laughed during the incident. Indeed, laughter can be a means of coping with distressing emotional states. Considering the laughter in the larger context—including that the laughter was not sustained; that the children were witnessing a murder at the time; that their behavior and testimony on the stand reflected negative emotional internal states associated with the incident; and that they were developmentally immature given their young ages—the most reasonable explanation is that the laughter was a stress response.
24. Any evaluation of the children’s psychological condition must also take into account both the history of violence toward Black Americans and the well-known cognitive biases that can lead someone to discount the trauma of young Black children.
25. The denial of trauma—especially by an authority figure—can be traumatic in and of itself. Therefore, discounting the children’s own accounts of their experiences has the potential to exacerbate the harm to the minors’ psyches in this case.

**Power Differentials: Minors versus Adults and State Actors versus Citizens**

26. Witnessing a murder, in any context, would give rise to trauma. The traumatic response is likely greater when, as in this case, there is a power differential between the children and the Defendant—an adult and a police officer.
27. Experiences of trauma are heightened by feelings of powerlessness. When minors interact with adults, minors habitually occupy the lower end of power differentials and can feel powerless. Minors receive messaging that they should follow and respect adults’ directives merely because the directive comes from an adult.

28. Additionally, the adults in their lives and the systems with which minors interact make decisions for children and adolescents, often without meaningful input from minors. Although minor status theoretically conveys certain protections provided by adults and societal systems, in reality, minor status often renders minors more vulnerable to harms caused by individual abuses of power and systemic dysfunctions.
29. This minor versus adult power differential can undermine children's and adolescents' ability to protect themselves (or others) or to use their voices—undermining their sense of agency and fostering a sense of powerlessness. If the adult also holds a distinct position of authority (such as a parent, teacher, or religious leader), this harm can be even greater. This is especially true when the adult occupies a position of state-sanctioned authority in which the adult may use deadly force, as was the case with Defendant Chauvin.
30. The fact that police officers possess this authority is one of several aspects of the distinct harm of violence perpetrated by police officers, also known as Police Violence.
31. In their article published in the American Journal of Public Health, DeVlyder et al. (2020)<sup>2</sup> theorized that police violence conveys a unique psychological insult for eight reasons, six of which are of particular relevance for the young witnesses in this case: 1) Police violence is state sanctioned. 2) The police are a pervasive, inescapable presence. 3) There are limited options for recourse. 4) Police violence alters deeply held beliefs that the criminal justice system should promote safety, not jeopardize it. 5) Police violence has racial and ethnic disparities in exposure that “can underscore a sense of diminished value within the US racial and class hierarchies.” 6) And police in the U.S. are typically armed.<sup>3</sup>

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<sup>2</sup> Jordan DeVlyder, Lisa Fedina & Bruce Link, *Impact of Police Violence on Mental Health: A Theoretical Framework*, 110 Am. J. Pub. Health e1 (Nov. 2020), available at: <https://tinyurl.com/3fvj8dhv>.

<sup>3</sup> *Id.* at e2-e5.

32. In various ways and to varying degrees, the seventeen-year-old witnesses expressed the desire to intervene and their realization that doing so was not safe because of the police officers' clear positions of power. While the officers in this case did not physically harm these minor witnesses, the minors watched as Defendant Chauvin actively weaponized his state-sanctioned authority against a dying man pleading for his life, and Defendant Chauvin can be seen on the video reaching for his mace canister in direct response to the bystanders. That experience would likely contribute to the minors' trauma insofar as they are both witnessing a violent crime being committed by someone charged with keeping them safe, and when Defendant Chauvin rebuffed and even threatened them, they were also denied the opportunity to meet their moral compass.

#### **Structural Racism and Racial Trauma**

33. Two of the minor witnesses, D.F. and J.R., were Black, the same race as George Floyd, which likely exacerbated their sense of identification with the victim and the resulting trauma.
34. For centuries, the Black American community has disproportionately experienced violence at the hands of law enforcement.
35. For members of racial minority groups, an identification with a Black murder victim—even in cases where the victim is not someone known personally—can serve as a distressing reminder of the threat to them and their loved ones.
36. With race-based trauma, psychological harm that one is subjected to solely because of one immutable trait, the psychobiological reactions that a Black youth experiences do not only originate from her personal relationship with the victim, but can also originate from a

heightened awareness of the historical and current incidences of life jeopardizing events experienced by other people of their shared race (Helms et al., 2012).<sup>4</sup>

37. When placed in a sociohistorical context, D.F. and J.R.'s experience of witnessing Mr. Floyd's murder by Defendant Chauvin reverberated with the experiences of many Black Americans who have been subjected to intergenerational trauma, state-sanctioned violence, and images of Black people dying at the hands of law enforcement.
38. Fear is a natural response to life-threatening situations. It stands to follow, and research shows, that psychological distress and functional impairment related to law enforcement officer contact and police killings take a unique toll on Black Americans (Bowleg et al., 2020; McLeod et al., 2020; Graham et al., 2020; Bor et al., 2018),<sup>5</sup> a toll which many in society, including those in the criminal justice system, may fail to fully appreciate.
39. D.F.'s testimony especially reflected this form of trauma. She testified that watching Mr. Floyd's murder impacted her because, when she saw Mr. Floyd, she saw a Black man. In turn, she drew a connection between his safety—or lack thereof—and that of her Black male loved ones, including her father, her brothers, her cousins, and her friends.

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<sup>4</sup> Janet E. Helms, Gerda Nicolas & Carlton Everett Green, *Racism and Ethnoviolence as Trauma: Enhancing Professional and Research Training*, 18 *Traumatology* 65 (2012), available at: <https://tinyurl.com/7zsj256x>.

<sup>5</sup> Lisa Bowleg et al., *Negative Police Encounters and Police Avoidance as Pathways to Depressive Symptoms Among US Black Men, 2015–2016*, 110 *J. Am. Pub. Health* S160 (2020), available at: <https://tinyurl.com/yd97azpx>; Melissa N. McLeod et al., *Police Interactions and the Mental Health of Black Americans: A Systematic Review*, 7 *J. Racial & Ethnic Health Disparities* 10 (2020), available at: <https://pubmed.ncbi.nlm.nih.gov/31482464/>; Amanda Graham et al., *Race and Worrying About Police Brutality: The Hidden Injuries of Minority Status in America*, 15 *Victims & Offenders* 549 (2020), available at: <https://tinyurl.com/y4xhryxa>; Jacob Bor et al., *Police Killings and Their Spillover Effects on the Mental Health of Black Americans: A Population-Based, Quasi-Experimental Study*, 392 *Lancet* 302 (2018), available at: <https://tinyurl.com/ptwcsswz>.

**Adultification and the Risk of Adultification Bias's Application to D.F. and J.R.**

40. Although adultification bias has largely been explored in the educational and juvenile justice settings, the risk of this bias also bears consideration in circumstances where Black girls are bystanders and witnesses in the criminal justice system and the Court is evaluating the experiences and impact on these children as a result of having witnessed a violent crime. Here, there is a risk that the minor witnesses may be viewed as more “adult” and therefore less traumatized by witnessing the murder of George Floyd. This is particularly true for D.F. and J.R.
41. The phenomenon of adultification has been characterized in two distinct ways in the mental health and legal literature.
42. In one form of adultification, the focus is on the youth’s behavior. This form refers to the socialization and actions of a child or adolescent who functionally surpasses societal expectations of age-matched peers. This form is rooted in environmental factors that require the child to behave in this more advanced manner.
43. In the second form of adultification, the focus shifts to adults’ perceptions. This second form refers to a bias toward viewing certain groups of children as less innocent, more adult, and—of particular relevance for the issue of minor witnesses—less in need of protection than age-matched peers. Notably, for Black girls specifically, the latter form has been identified in how adults view them and implicated in how they treat them.
44. Taking over nine minutes of continuous footage on her cell phone, D.F. captured the murder of George Floyd, choosing not to turn away from a scene whose graphic nature would warrant trigger warnings in mediums used by adults. She testified to her sense of obligation to do something, knowing that what she witnessed “wasn’t right.”

45. Both forms of adultification have relevance in understanding her actions. As a Black girl, she is at risk of having her actions interpreted through a lens that denies her vulnerability and attributes more advanced motives to her actions. With adultification bias there is a risk of minimizing the emotional and developmental vulnerability of D.F. and her nine-year-old cousin as they witnessed a murder. With mindfulness of it, the potential impact is more likely to be interpreted with appropriate consideration of the inherent developmental considerations. Furthermore, D.F.'s ostensibly mature actions can be understood as an empathically driven response to a tragic situation in which the youth should never have been placed.

#### **Developmental Considerations**

##### **Legal and Neurobiological Discordance RE: the Developmental Period**

46. The fact that three of the four minor witnesses were seventeen years old—just one year shy of legal adulthood at age eighteen—in no way minimizes the trauma they suffered from witnessing Defendant Chauvin murder Mr. Floyd.
47. Neuroimaging and psychological studies demonstrate that the developmental period actually extends into the early twenties. In other words, an individual's sense of herself and the world, as well as the neurocircuitry of her brain, is not adult-like for a number of years even after turning eighteen. Keeping this in mind, no less consideration should be given to these minors' traumatic exposure because three of them were age seventeen.

##### **Development and the Minor Plaintiffs' Actions**

48. Developmental factors may have shaped the minors' responses, making it more difficult for them to walk away from a novel, emotionally charged situation. Simply put, during the period of adolescence—the age-group of D.F., A.F., and K.G.—their brains compared to adult brains would be differentially impacted by emotional or novel stimuli. The

adolescent brains place more weight on compelling, immediate factors than on potential long-term consequences. Walking away from the scene of Mr. Floyd's murder, even if remaining there carried significant risk of long-term psychological consequences, may have been more difficult for them to do than for adults.

49. There are also developmental considerations related to decision-making in a group setting. Due to their greater susceptibility to peer pressure, the adolescent witnesses may have been more likely to follow the lead of both their peers and the adult bystanders who also remained on the scene.
50. Finally, in both the adolescent and the mid-childhood age groups (J.R.'s age group) coping skills are often limited or under development. Sometimes in states of high emotional distress, moments of smiling or even laughter may be employed as ways to discharge overwhelming experiences of fear and anxiety.

#### **Limitations in Language, Abstract Reasoning and Emotional Expression**

51. It is to be expected that J.R. would have limited testimony regarding the emotional impact of Mr. Floyd's murder on her. In a child this age, it would be a gross misinterpretation to conclude that limited expressions of a traumatic event's emotional impact equate to limited injury.
52. J.R. was nine years old at the time of the crime and testified less than one year later. At this age, she would be expected to have developmentally-based limitations in language and abstract reasoning. This could impact her understanding of events in real time, the meaning she attaches to the events, how she remembers them, and her ability to understand their impact on her. Additionally, the courtroom—an environment that is anxiety provoking even for adults who are unfamiliar with the setting—would be expected to be an

intimidating environment for such a young girl, with the potential to further diminish her emotional reflection or expression.

### **The Varied Manifestations and Potential Sequelae of Traumatic Events**

53. Trauma has a myriad of responses that can be markedly different from one individual to another. They can even vary substantially in the same individual over the course of time or with changes in her environment. Thus, lay interpretations of what constitutes a traumatic response and what does not, especially when developmental factors confer added complexity, are predictably fraught with error. People can have delayed reactions that are much more distressing and long-lasting than what is apparent in real time. Additionally, they can have paradoxical reactions, such as laughing or smiling when afraid or anxious.
54. To varying degrees, the minor witnesses spoke of their feelings in real time, including being sad, scared, angry and powerless. When asked about subsequent impact, D.F. described guilt that she did not do more to prevent Mr. Floyd's death and A.F. described avoidance of Cup Foods, the site of the murder. Irrational guilt and avoidance are both common symptoms of psychological trauma. These impacts were revealed in a setting that was far from therapeutic and where their mental state was not the focus of their testimony. It is likely, therefore, that what is available for the Court's review falls far short of capturing the psychic injury experienced by the minor witnesses as a result of Defendant Chauvin's actions.
55. Tragically, given the circumstances of the crime these minors witnessed, there is one reminder of the trauma that is unavoidable—the criminal justice system. They watched a uniformed officer slowly kill a man in broad daylight. The four girls experienced this during a developmental period when they are still forming an understanding of social

hierarchies and their place in them, which could have lifelong ramifications for how—or even if—they seek help when they are in need of protection themselves.

### **Conclusion**

56. As stated at the outset of this declaration, evaluating the trauma experienced by the minor witnesses requires a multi-faceted approach. Taking into account the nature of the violent offense the children witnessed; that the murder was carried out by a state actor; that at least two of the witnesses belong to the same minority group as the victim, Mr. Floyd, resulting in a kinship that D.F. articulated when she drew a connection between Mr. Floyd and the men in her life; there is a multitude of reasons to expect and presume that these children have suffered trauma as a result of what they witnessed. Fair consideration of what these children experienced also requires an analysis that is aware of and intentionally corrects for bias—one that correctly accounts for the vulnerability associated with youth and that does not minimize their pain. Their actions must be viewed through the same lens through which all children would be viewed—one that does not understate their emotional and developmental vulnerability and, likewise, does not impose behavioral or decision-making expectations more appropriate for an adult. Taking all of this into consideration, and in light of the behaviors I observed in the videos and in the testimony, it is fair to conclude, to a reasonable degree of medical certainty, that the minor witnesses experienced trauma as a result of having witnessed the Defendant's actions.

PURSUANT TO MINN. STAT. 358.116 (2020), I DECLARE UNDER PENALTY OF PERJURY THAT EVERYTHING I HAVE STATED IN THIS DOCUMENT IS TRUE AND CORRECT.

Dated: July 7, 2021

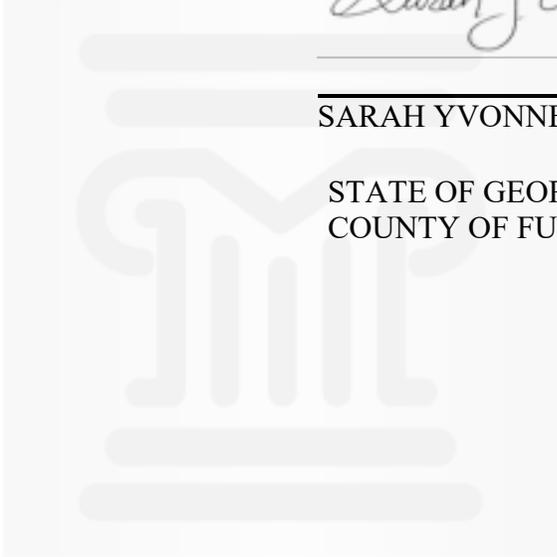


*Sarah Yvonne Vinson*

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SARAH YVONNE VINSON

STATE OF GEORGIA  
COUNTY OF FULTON



MINNESOTA  
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BRANCH